

### Best Case Bankruptcy

B5 (Official Form 5) (12/07) - Page 2

Name of Debtor Gleason/Madden Partnership

Case No. \_\_\_\_\_

**TRANSFER OF CLAIM**

☐ Check this box if there has been a transfer of any claim against the debtor by or to any petitioner. Attach all documents evidencing the transfer and any statements that are required under Bankruptcy Rule 1003(a).

**REQUEST FOR RELIEF**

Petitioner(s) request that an order for relief be entered against the debtor under the chapter of title 11, United States Code, specified in this petition. If any petitioner is a foreign representative appointed in a foreign proceeding, a certified copy of the order of the court granting recognition is attached.

Petitioner(s) declare under penalty of perjury that the foregoing is true and correct according to the best of their knowledge, information, and belief.

X Patrick W. Gleason  
Signature of Petitioner or Representative (State title)  
**Patrick W. Gleason** **February 4, 2009**  
Name of Petitioner Date Signed

Name & Mailing Address of Individual Signing in Representative Capacity  
**Patrick W. Gleason**  
**791 Penfield Dr.**  
**Carol Stream, IL 60188**

X February 4, 2009  
Signature of Attorney Date

**Stahl Cowen Crowley, LLC**

Name of Attorney Firm (If any)

**55 W. Monroe Street**  
**Suite 1200**  
**Chicago, IL 60603**

Address

Telephone No. **312-641-0060**

X Diane E. Gleason  
Signature of Petitioner or Representative (State title)  
**Diane E. Gleason** **February 4, 2009**  
Name of Petitioner Date Signed

Name & Mailing Address of Individual Signing in Representative Capacity  
**Diane E. Gleason**  
**301 N. Ocean Blvd.**  
**Apt #309**  
**Pompano Beach, FL 33062**

X February 4, 2009  
Signature of Attorney Date

**Stahl Cowen Crowley, LLC**

Name of Attorney Firm (If any)

**55 W. Monroe Street**  
**Suite 1200**  
**Chicago, IL 60603**

Address

Telephone No. **312-641-0060**

X Margaret Ramirez  
Signature of Petitioner or Representative (State title)  
**Margaret Ramirez** **February 4, 2009**  
Name of Petitioner Date Signed

Name & Mailing Address of Individual Signing in Representative Capacity  
**Margaret Ramirez**  
**1049 Baybrook Drive**  
**Carol Stream, IL 60188**

X February 4, 2009  
Signature of Attorney Date

**Stahl Cowen Crowley, LLC**

Name of Attorney Firm (If any)

**55 W. Monroe Street**  
**Suite 1200**  
**Chicago, IL 60603**

Address

Telephone No. **312-641-0060**

**PETITIONING CREDITORS**

Name and Address of Petitioner	Nature of Claim	Amount of Claim
<b>Patrick W. Gleason</b> <b>791 Penfield Dr.</b> <b>Carol Stream, IL 60188</b>	<b>Partnership distributions</b>	<b>183,834.00</b>
<b>Diane E. Gleason</b> <b>301 N. Ocean Blvd.</b> <b>Apt #309</b> <b>Pompano Beach, FL 33062</b>	<b>Partnership distributions</b>	<b>183,834.00</b>
<b>Margaret Ramirez</b> <b>1049 Baybrook Drive</b> <b>Carol Stream, IL 60188</b>	<b>Partnership distributions</b>	<b>183,834.00</b>
Note: If there are more than three petitioners, attach additional sheets with the statement under penalty of perjury, each petitioner's signature under the statement and the name of attorney and petitioning creditor information in the format above.		<b>Total Amount of Petitioners' Claims</b> <b>1,103,004.00</b>

1 of 1 continuation sheets attached

Name of Debtor Gleason/Wadden Partnership

Case No. \_\_\_\_\_

BS (Official Form 5) (12/07) - Page 2

### TRANSFER OF CLAIM

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### REQUEST FOR RELIEF

Petitioner(s) request that an order for relief be entered against the debtor under the chapter of title 11, United States Code, specified in this petition. If any petitioner is a foreign representative appointed in a foreign proceeding, a certified copy of the order of the court granting recognition is attached.

Petitioner(s) declare under penalty of perjury that the foregoing is true and correct according to the best of their knowledge, information, and belief.

X  
Signature of Petitioner or Representative (State title)  
Patrick W. Gleason February 4, 2009  
Name of Petitioner Date Signed

Name & Mailing Address of Individual Signing in Representative Capacity  
Patrick W. Gleason  
791 Penfield Dr.  
Carol Stream, IL 60188

X February 4, 2009  
Signature of Attorney Date

Stahl Cowen Crowley, LLC  
Name of Attorney Firm (If any)

55 W. Monroe Street  
Suite 1200  
Chicago, IL 60603

Address  
Telephone No. 312-641-0060

X  
Signature of Petitioner or Representative (State title)  
Diane E. Gleason February 4, 2009  
Name of Petitioner Date Signed

Name & Mailing Address of Individual Signing in Representative Capacity  
Diane E. Gleason  
301 N. Ocean Blvd.  
Apt #309  
Pompano Beach, FL 33062

X February 4, 2009  
Signature of Attorney Date

Stahl Cowen Crowley, LLC  
Name of Attorney Firm (If any)

55 W. Monroe Street  
Suite 1200  
Chicago, IL 60603

Address  
Telephone No. 312-641-0060

X  
Signature of Petitioner or Representative (State title)  
Margaret Ramirez February 4, 2009  
Name of Petitioner Date Signed

Name & Mailing Address of Individual Signing in Representative Capacity  
Margaret Ramirez  
1849 Baybrook Drive  
Carol Stream, IL 60188

X February 4, 2009  
Signature of Attorney Date

Stahl Cowen Crowley, LLC  
Name of Attorney Firm (If any)

55 W. Monroe Street  
Suite 1200  
Chicago, IL 60603

Address  
Telephone No. 312-641-0060

### PETITIONING CREDITORS

Name and Address of Petitioner	Nature of Claim	Amount of Claim
<u>Patrick W. Gleason</u> <u>791 Penfield Dr.</u> <u>Carol Stream, IL 60188</u>	<u>Partnership distributions</u>	<u>183,834.00</u>
<u>Diane E. Gleason</u> <u>301 N. Ocean Blvd.</u> <u>Apt #309</u> <u>Pompano Beach, FL 33062</u>	<u>Partnership distributions</u>	<u>183,834.00</u>
<u>Margaret Ramirez</u> <u>1849 Baybrook Drive</u> <u>Carol Stream, IL 60188</u>	<u>Partnership distributions</u>	<u>183,834.00</u>
Note: If there are more than three petitioners, attach additional sheets with the statement under penalty of perjury, each petitioner's signature under the statement and the name of attorney and petitioning creditor information in the format above.		Total Amount of Petitioners' Claims <u>1,103,004.00</u>

B5 (Official Form 5) (12/07) - Page 2

Name of Debtor: Gleason/Madden Partnership  
Case No. \_\_\_\_\_

**TRANSFER OF CLAIM**

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**REQUEST FOR RELIEF**

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Petitioner(s) declare under penalty of perjury that the foregoing is true and correct according to the best of their knowledge, information, and belief.

X \_\_\_\_\_  
Signature of Petitioner or Representative (State title)  
**Patrick W. Gleason** **February 4, 2009**  
Name of Petitioner Date Signed  
Name & Mailing Address of Individual Signing in Representative Capacity  
**Patrick W. Gleason**  
**791 Penfield Dr.**  
**Carol Stream, IL 60188**

X \_\_\_\_\_ **February 4, 2009**  
Signature of Attorney Date  
**Stahl Cowen Crowley, LLC**  
Name of Attorney Firm (If any)  
**55 W. Monroe Street**  
**Suite 1200**  
**Chicago, IL 60603**  
Address  
Telephone No. **312-641-0060**

X \_\_\_\_\_  
Signature of Petitioner or Representative (State title)  
**Diane E. Gleason** **February 4, 2009**  
Name of Petitioner Date Signed  
Name & Mailing Address of Individual Signing in Representative Capacity  
**Diane E. Gleason**  
**301 N. Ocean Blvd.**  
**Apt #309**  
**Pompano Beach, FL 33062**

X \_\_\_\_\_ **February 4, 2009**  
Signature of Attorney Date  
**Stahl Cowen Crowley, LLC**  
Name of Attorney Firm (If any)  
**55 W. Monroe Street**  
**Suite 1200**  
**Chicago, IL 60603**  
Address  
Telephone No. **312-641-0060**

X *Margaret Ramirez* *General Partner*  
Signature of Petitioner or Representative (State title)  
**Margaret Ramirez** **February 4, 2009**  
Name of Petitioner Date Signed  
Name & Mailing Address of Individual Signing in Representative Capacity  
**Margaret Ramirez**  
**1049 Baybrook Drive**  
**Carol Stream, IL 60188**

X \_\_\_\_\_ **February 4, 2009**  
Signature of Attorney Date  
**Stahl Cowen Crowley, LLC**  
Name of Attorney Firm (If any)  
**55 W. Monroe Street**  
**Suite 1200**  
**Chicago, IL 60603**  
Address  
Telephone No. **312-641-0060**

**PETITIONING CREDITORS**

Name and Address of Petitioner	Nature of Claim	Amount of Claim
<b>Patrick W. Gleason</b> <b>791 Penfield Dr.</b> <b>Carol Stream, IL 60188</b>	<b>Partnership distributions</b>	<b>183,834.00</b>
<b>Diane E. Gleason</b> <b>301 N. Ocean Blvd.</b> <b>Apt #309</b> <b>Pompano Beach, FL 33062</b>	<b>Partnership distributions</b>	<b>183,834.00</b>
<b>Margaret Ramirez</b> <b>1049 Baybrook Drive</b> <b>Carol Stream, IL 60188</b>	<b>Partnership distributions</b>	<b>183,834.00</b>
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Name of Debtor Gleason/Madden Partnership

Case No. \_\_\_\_\_

HS (Official Form 5) (12/07) - Page 2

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Petitioner(s) declare under penalty of perjury that the foregoing is true and correct according to the best of their knowledge, information, and belief.

X Suzanne T. Mennecke  
Signature of Petitioner or Representative (State title)

Suzanne T. Mennecke February 4, 2009  
Name of Petitioner Date Signed

Name & Mailing Address of Individual Signing in Representative Capacity  
Suzanne T. Mennecke  
531 Queenswood Drive Lane  
Wheaton, IL 60187

X \_\_\_\_\_ February 4, 2009  
Signature of Attorney Date

Stahl Cowen Crowley, LLC

Name of Attorney Firm (If any)

55 W. Monroe Street  
Suite 1200  
Chicago, IL 60603

Address  
Telephone No. 312-641-0060

X \_\_\_\_\_  
Signature of Petitioner or Representative (State title)

Linda M. McNeil February 4, 2009  
Name of Petitioner Date Signed

Name & Mailing Address of Individual Signing in Representative Capacity  
Linda M. McNeil  
791 Penfield Drive  
Carol Stream, IL 60188

X \_\_\_\_\_ February 4, 2009  
Signature of Attorney Date

Stahl Cowen Crowley, LLC

Name of Attorney Firm (If any)

55 W. Monroe Street  
Suite 1200  
Chicago, IL 60603

Address  
Telephone No. 312-641-0060

X \_\_\_\_\_  
Signature of Petitioner or Representative (State title)

Michael B. Gleason February 4, 2009  
Name of Petitioner Date Signed

Name & Mailing Address of Individual Signing in Representative Capacity  
Michael B. Gleason  
31649 N. Calle De Los Flores  
Cave Creek, AZ 85331

X \_\_\_\_\_ February 4, 2009  
Signature of Attorney Date

Stahl Cowen Crowley, LLC

Name of Attorney Firm (If any)

55 W. Monroe Street  
Suite 1200  
Chicago, IL 60603

Address  
Telephone No. 312-641-0060

### PETITIONING CREDITORS

Name and Address of Petitioner	Nature of Claim	Amount of Claim
<u>Suzanne T. Mennecke</u> <u>531 Queenswood Drive</u> <u>Wheaton, IL 60187</u>	<u>Partnership distributions</u>	<u>183,834.00</u>
<u>Linda M. McNeil</u> <u>791 Penfield Drive</u> <u>Carol Stream, IL 60188</u>	<u>Partnership distributions</u>	<u>183,834.00</u>
<u>Michael B. Gleason</u> <u>31649 N. Calle De Los Flores</u> <u>Cave Creek, AZ 85331</u>	<u>Partnership distributions</u>	<u>183,834.00</u>
Note: If there are more than three petitioners, attach additional sheets with the statement under penalty of perjury, each petitioner's signature under the statement and the name of attorney and petitioning creditor information in the format above.		Total Amount of Petitioners' Claims <u>1,103,004.00</u>

1 continuation sheets attached

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X \_\_\_\_\_  
Signature of Petitioner or Representative (State title)

Suzanne T. Mennecke February 4, 2009  
Name of Petitioner Date Signed

Name & Mailing Suzanne T. Mennecke  
Address of Individual 531 Queenswood Drive  
Signing in Representative Wheaton, IL 60187  
Capacity

X \_\_\_\_\_ February 4, 2009  
Signature of Attorney Date

Stahl Cowen Crowley, LLC

Name of Attorney Firm (If any)

55 W. Monroe Street  
Suite 1200  
Chicago, IL 60603

Address

Telephone No. 312-641-0060

X Linda M. McNeil  
Signature of Petitioner or Representative (State title)

Linda M. McNeil February 4, 2009  
Name of Petitioner Date Signed

Name & Mailing Linda M. McNeil  
Address of Individual 791 Penfield Drive  
Signing in Representative Carol Stream, IL 60188  
Capacity

X \_\_\_\_\_ February 4, 2009  
Signature of Attorney Date

Stahl Cowen Crowley, LLC

Name of Attorney Firm (If any)

55 W. Monroe Street  
Suite 1200  
Chicago, IL 60603

Address

Telephone No. 312-641-0060

X \_\_\_\_\_  
Signature of Petitioner or Representative (State title)

Michael B. Gleason February 4, 2009  
Name of Petitioner Date Signed

Name & Mailing Michael B. Gleason  
Address of Individual 31649 N. Calle De Los Flores  
Signing in Representative Cave Creek, AZ 85331  
Capacity

X \_\_\_\_\_ February 4, 2009  
Signature of Attorney Date

Stahl Cowen Crowley, LLC

Name of Attorney Firm (If any)

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Chicago, IL 60603

Address

Telephone No. 312-641-0060

**PETITIONING CREDITORS**

Name and Address of Petitioner	Nature of Claim	Amount of Claim
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<u>Linda M. McNeil</u> <u>791 Penfield Drive</u> <u>Carol Stream, IL 60188</u>	<u>Partnership distributions</u>	<u>183,834.00</u>
<u>Michael B. Gleason</u> <u>31649 N. Calle De Los Flores</u> <u>Cave Creek, AZ 85331</u>	<u>Partnership distributions</u>	<u>183,834.00</u>
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1 continuation sheets attached

Name of Debtor Gleason/Madden Partnership

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X \_\_\_\_\_  
Signature of Petitioner or Representative (State title)  
**Suzanne T. Mennecke** **February 4, 2009**  
Name of Petitioner Date Signed

Name & Mailing Address of Individual Signing in Representative Capacity  
**Suzanne T. Mennecke**  
**531 Queenswood Drive**  
**Wheaton, IL 60187**

X \_\_\_\_\_ **February 4, 2009**  
Signature of Attorney Date

**Stahl Cowen Crowley, LLC**

Name of Attorney Firm (If any)

**55 W. Monroe Street**  
**Suite 1200**  
**Chicago, IL 60603**

Address

Telephone No. **312-641-0060**

X \_\_\_\_\_  
Signature of Petitioner or Representative (State title)  
**Linda M. McNeil** **February 4, 2009**  
Name of Petitioner Date Signed

Name & Mailing Address of Individual Signing in Representative Capacity  
**Linda M. McNeil**  
**791 Penfield Drive**  
**Carol Stream, IL 60188**

X \_\_\_\_\_ **February 4, 2009**  
Signature of Attorney Date

**Stahl Cowen Crowley, LLC**

Name of Attorney Firm (If any)

**55 W. Monroe Street**  
**Suite 1200**  
**Chicago, IL 60603**

Address

Telephone No. **312-641-0060**

X Michael B. Gleason  
Signature of Petitioner or Representative (State title)  
**Michael B. Gleason** **February 4, 2009**  
Name of Petitioner Date Signed

Name & Mailing Address of Individual Signing in Representative Capacity  
**Michael B. Gleason**  
**31649 N. Calle De Los Flores**  
**Cave Creek, AZ 85331**

X \_\_\_\_\_ **February 4, 2009**  
Signature of Attorney Date

**Stahl Cowen Crowley, LLC**

Name of Attorney Firm (If any)

**55 W. Monroe Street**  
**Suite 1200**  
**Chicago, IL 60603**

Address

Telephone No. **312-641-0060**

**PETITIONING CREDITORS**

Name and Address of Petitioner <b>Suzanne T. Mennecke</b> <b>531 Queenswood Drive</b> <b>Wheaton, IL 60187</b>	Nature of Claim <b>Partnership distributions</b>	Amount of Claim <b>183,834.00</b>
Name and Address of Petitioner <b>Linda M. McNeil</b> <b>791 Penfield Drive</b> <b>Carol Stream, IL 60188</b>	Nature of Claim <b>Partnership distributions</b>	Amount of Claim <b>183,834.00</b>
Name and Address of Petitioner <b>Michael B. Gleason</b> <b>31649 N. Calle De Los Flores</b> <b>Cave Creek, AZ 85331</b>	Nature of Claim <b>Partnership distributions</b>	Amount of Claim <b>183,834.00</b>
Note: If there are more than three petitioners, attach additional sheets with the statement under penalty of perjury, each petitioner's signature under the statement and the name of attorney and petitioning creditor information in the format above.		Total Amount of Petitioners' Claims <b>1,103,004.00</b>

1 continuation sheets attached